Fill in this information to identify your case:		
United States Bankruptcy Court for the:		
EASTERN DISTRICT OF NEW YORK		
Case number (if known)	Chapter you are filing under:	
	☐ Chapter 7	
	☐ Chapter 11	
	☐ Chapter 12	
	■ Chapter 13	Check if this an amended filing

### Official Form 101

# Voluntary Petition for Individuals Filing for Bankruptcy

12/17

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Pa	t 1: Identify Yourself			
		About Debtor 1:		About Debtor 2 (Spouse Only in a Joint Case):
1.	Your full name			
	Write the name that is on your government-issued picture identification (for example, your driver's license or passport).  Bring your picture identification to your meeting with the trustee.	Tristan First name  J. Middle name  Benozer Last name and Suffix (Sr., Jr., II, III)	-	First name  Middle name  Last name and Suffix (Sr., Jr., II, III)
2.	All other names you have used in the last 8 years			
	Include your married or maiden names.			
3.	Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number (ITIN)	xxx-xx-4469		

4. Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years Include trade names and		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):			
		■ I have not used any business name or EINs.  Business name(s)	☐ I have not used any business name or EINs.  Business name(s)			
	doing business as names		23333333(6)			
		EINs	EINs			
5.	Where you live		If Debtor 2 lives at a different address:			
		12 Rue Frochot PARIS, FRANCE 75009				
		Number, Street, City, State & ZIP Code	Number, Street, City, State & ZIP Code			
		Out of Country County	County			
		If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.	County  If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address.			
		Number, P.O. Box, Street, City, State & ZIP Code	Number, P.O. Box, Street, City, State & ZIP Code			
6.	Why you are choosing this district to file for bankruptcy	Check one:  Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.  I have another reason. Explain. (See 28 U.S.C. § 1408.)  Bank accounts in this District for the last 180 days before filing this petition	Check one:  ☐ Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.  ☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)			

7.	The chapter of the Bankruptcy Code you are		Check one. (For a brief description of each, see Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)). Also, go to the top of page 1 and check the appropriate box.  □ Chapter 7					
	choosing to file under	☐ Cha	apter 7					
		☐ Cha	apter 11					
		☐ Chapter 12						
		■ Cha	apter 13					
8.	How you will pay the fee  I will pay the entire fee when I file my petition. Please check with the clerk's office in your loca about how you may pay. Typically, if you are paying the fee yourself, you may pay with cash, cas order. If your attorney is submitting your payment on your behalf, your attorney may pay with a crua pre-printed address.					ourself, you may pay with cash, cashier's check	, or money	
					allments. If you choose this option (Official Form 103A).	on, sign and attach the Application for Individua	ls to Pay	
			request the	at my fee be wai	ived (You may request this option	n only if you are filing for Chapter 7. By law, a ju our income is less than 150% of the official pove	udge may, erty line that	
		a	applies to yo	ur family size and	d you are unable to pay the fee in	n installments). If you choose this option, you moial Form 103B) and file it with your petition.		
9.	Have you filed for bankruptcy within the	■ No.						
	last 8 years?	☐ Yes						
			District			Case number		
			District		When	Case number		
			District		When	Case number		
10.	Are any bankruptcy cases pending or being filed by a spouse who is not filing this case with you, or by a business partner, or by an	■ No □ Yes						
	affiliate?		Dahtan			Deletienskip to vev		
			Debtor District		When	Relationship to you  Case number, if known		
			Debtor		vilen	Relationship to you		
			District		When	Case number, if known		
11.	Do you rent your	□ No.	Go to	line 12.				
	residence?	■ Yes			ined an eviction judgment agains	st vou?		
		■ Yes	•	No. Go to line 1		,		
			■			Judgment Against You (Form 101A) and file it v	with this	

Debtor 1 Tristan J. Benozer

۷.	Are you a sole proprietor of any full- or part-time business?	■ No.	Go to	Part 4.	
		☐ Yes.	Name	e and location of bus	siness
	A sole proprietorship is a business you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or LLC.		Name	e of business, if any	
	If you have more than one sole proprietorship, use a separate sheet and attach		Numb	per, Street, City, Sta	te & ZIP Code
	it to this petition.		Chec		ox to describe your business:
					ness (as defined in 11 U.S.C. § 101(27A))
				Single Asset Real	Estate (as defined in 11 U.S.C. § 101(51B))
				Stockbroker (as d	lefined in 11 U.S.C. § 101(53A))
				Commodity Broke	er (as defined in 11 U.S.C. § 101(6))
				None of the above	е
3.	Are you filing under Chapter 11 of the Bankruptcy Code and are you a small business debtor?	deadline operation	s. If you ir	ndicate that you are low statement, and f	court must know whether you are a small business debtor so that it can set appropriate a small business debtor, you must attach your most recent balance sheet, statement of federal income tax return or if any of these documents do not exist, follow the procedure
	For a definition of small	■ No.	I am ı	not filing under Char	oter 11.
	business debtor, see 11 U.S.C. § 101(51D).	□ No.	I am f Code		11, but I am NOT a small business debtor according to the definition in the Bankruptcy
		☐ Yes.	I am f	iling under Chapter	11 and I am a small business debtor according to the definition in the Bankruptcy Code.
ar	t 4: Report if You Own or	Have Any	y Hazardo	ous Property or An	y Property That Needs Immediate Attention
4.	Do you own or have any	■ No.			
	property that poses or is alleged to pose a threat of imminent and identifiable hazard to	☐ Yes.	What is	the hazard?	
	public health or safety? Or do you own any property that needs immediate attention?			diate attention is why is it needed?	
	For example, do you own perishable goods, or livestock that must be fed,		Where is	s the property?	
	or a building that needs urgent repairs?				

Debtor 1 Tristan J. Benozer

#### Part 5:

#### Explain Your Efforts to Receive a Briefing About Credit Counseling

#### Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

#### **About Debtor 1:**

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

☐ I am not required to receive a briefing about credit counseling because of:

#### ☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

#### ☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

#### ☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court.

#### About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

□ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit
counseling because of:

#### ☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

#### ☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

#### ☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

Den	ioi i Ilistali J. Bellozei				(II KIIOWII)		
Part	6: Answer These Quest	ions for Re	porting Purposes				
16.	What kind of debts do you have?			sumer debts? Consumer debts are definal, family, or household purpose."	ned in 11 U.S.C. § 101(8) as "incurred by an		
			Yes. Go to line 17.				
			Are your debts primarily business debts? Business debts are debts that you incurred to obtain money for a business or investment or through the operation of the business or investment.				
			☐ No. Go to line 16c.	· ·			
			☐ Yes. Go to line 17.				
		16c.	State the type of debts you owe	e that are not consumer debts or busines	s debts		
17.	Are you filing under Chapter 7?	■ No.	I am not filing under Chapter 7.	Go to line 18.			
	Do you estimate that after any exempt property is excluded and			you estimate that after any exempt proposable to distribute to unsecured creditors?	erty is excluded and administrative expenses		
	administrative expenses		□ No				
	are paid that funds will be available for distribution to unsecured creditors?		□ Yes				
18.	How many Creditors do you estimate that you owe?	■ 1-49 □ 50-99 □ 100-19 □ 200-99		☐ 1,000-5,000 ☐ 5001-10,000 ☐ 10,001-25,000	☐ 25,001-50,000 ☐ 50,001-100,000 ☐ More than100,000		
19.	How much do you estimate your assets to be worth?	□ \$100,0	0,000 1 - \$100,000 01 - \$500,000 01 - \$1 million	☐ \$1,000,001 - \$10 million ☐ \$10,000,001 - \$50 million ☐ \$50,000,001 - \$100 million ☐ \$100,000,001 - \$500 million	☐ \$500,000,001 - \$1 billion ☐ \$1,000,000,001 - \$10 billion ☐ \$10,000,000,001 - \$50 billion ☐ More than \$50 billion		
20.	How much do you estimate your liabilities to be?	<b>\$100,0</b>	0,000 01 - \$100,000 01 - \$500,000 01 - \$1 million	□ \$1,000,001 - \$10 million □ \$10,000,001 - \$50 million □ \$50,000,001 - \$100 million □ \$100,000,001 - \$500 million	□ \$500,000,001 - \$1 billion □ \$1,000,000,001 - \$10 billion □ \$10,000,000,001 - \$50 billion □ More than \$50 billion		
Part	7: Sign Below						
For	you	I have exa	mined this petition, and I decla	re under penalty of perjury that the inform	nation provided is true and correct.		
				am aware that I may proceed, if eligible, ef available under each chapter, and I ch			
				t pay or agree to pay someone who is not notice required by 11 U.S.C. § 342(b).	an attorney to help me fill out this		
		I request r	elief in accordance with the cha	apter of title 11, United States Code, spec	sified in this petition.		
		bankruptc and 3571.	y case can result in fines up to	oncealing property, or obtaining money o \$250,000, or imprisonment for up to 20 y	r property by fraud in connection with a ears, or both. 18 U.S.C. §§ 152, 1341, 1519,		
		Tristan .	In J. Benozer J. Benozer of Debtor 1	Signature of Debtor	2		
		Executed	on January 8, 2019 MM / DD / YYYY	Executed on MM	/ DD / YYYY		

Debtor 1 Tristan J. Benoze	er .	Case number (if known)		
For your attorney, if you are represented by one	under Chapter 7, 11, 12, or 13 of title 11, United	States Code, and have	e informed the debtor(s) about eligibility to proceed explained the relief available under each chapter debtor(s) the notice required by 11 U.S.C. § 342(b)	
If you are not represented by an attorney, you do not need to file this page.	and, in a case in which § 707(b)(4)(D) applies, of schedules filed with the petition is incorrect.	certify that I have no know	wledge after an inquiry that the information in the	
	/s/ Glenn L. Kantor	Date	January 8, 2019	
	Signature of Attorney for Debtor		MM / DD / YYYY	
	Glenn L. Kantor Printed name			
	Glenn L. Kantor			

Email address

150 Motor Parkway

Hauppauge, NY 11788

Number, Street, City, State & ZIP Code

Contact phone 877-725-0700

Suite 401

NY Bar number & State send2kantorlaw@gmail.com

Fill	in this information to identify your case:		
Deb	otor 1 Tristan J. Benozer First Name Middle Name Last Name		
Deb	First Name Middle Name Last Name btor 2		
(Spo	use if, filing) First Name Middle Name Last Name		
Uni	ted States Bankruptcy Court for the: EASTERN DISTRICT OF NEW YORK		
	se number	_	eck if this is an ended filing
	ficial Form 106Sum mmary of Your Assets and Liabilities and Certain Statistical Information		12/15
Be a info you	s complete and accurate as possible. If two married people are filing together, both are equally responsible formation. Fill out all of your schedules first; then complete the information on this form. If you are filing amend original forms, you must fill out a new <i>Summary</i> and check the box at the top of this page.		
Par	1: Summarize Your Assets		
			r assets e of what you own
1.	Schedule A/B: Property (Official Form 106A/B)  1a. Copy line 55, Total real estate, from Schedule A/B	\$	0.00
	1b. Copy line 62, Total personal property, from Schedule A/B	\$_	27,846.00
	1c. Copy line 63, Total of all property on Schedule A/B	\$_	27,846.00
Par	2: Summarize Your Liabilities		
		You	r liabilities
		Amo	unt you owe
2.	Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D)  2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D	\$_	0.00
3.	Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F	\$_	0.00
	3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F	\$_	210,682.00
	Your total liabilities	\$	210,682.00
Par	Summarize Your Income and Expenses		
4.	Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I	\$	7,743.00
5.	Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J	\$_	6,845.00
Par	4: Answer These Questions for Administrative and Statistical Records		
6.	Are you filing for bankruptcy under Chapters 7, 11, or 13?  No. You have nothing to report on this part of the form. Check this box and submit this form to the court with you	ur other	schedules.
7.	Yes What kind of debt do you have?		
	Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.	a persor	al, family, or
	Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this the court with your other schedules.	s box and	submit this form to

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

page 1 of 2

8. **From the** *Statement of Your Current Monthly Income*: Copy your total current monthly income from Official Form 122A-1 Line 11; **OR**, Form 122B Line 11; **OR**, Form 122C-1 Line 14.

9,780.00

\$

9. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

From Part 4 on Schedule E/F, copy the following:	Total c	laim
9a. Domestic support obligations (Copy line 6a.)	\$	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$	0.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$	0.00
9d. Student loans. (Copy line 6f.)	\$	32,818.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$	0.00
9g. <b>Total.</b> Add lines 9a through 9f.	\$	32,818.00

Debtor 1		l l	
	Tristan J. Benozer First Name Middle Name	Last Name	
Debtor 2 (Spouse, if filing)	First Name Middle Name	Last Name	
-	ankruptcy Court for the: EASTERN DISTRICT OF NEW		
_			<b>–</b>
Case number _		-	☐ Check if this is an amended filing
Official Ea	orm 1064/D		
	orm 106A/B le A/B: Property		42/45
	separately list and describe items. List an asset only once. If	an accept fits in more than one category list the	12/15
information. If mor Answer every ques	Be as complete and accurate as possible. If two married peoplere space is needed, attach a separate sheet to this form. On the stion.  Each Residence, Building, Land, or Other Real Estate You Ownhave any legal or equitable interest in any residence, building	e top of any additional pages, write your name	
No. Go to Pa	rt 2.		
☐ Yes. Where	is the property?		
Part 2: Describe	Your Vehicles		
someone else dri	use, or have legal or equitable interest in any vehicles, vives. If you lease a vehicle, also report it on Schedule G: Errucks, tractors, sport utility vehicles, motorcycles		de any vehicles you own that
Someone else dri  Cars, vans, tr  No Yes  Watercraft, ai	ives. If you lease a vehicle, also report it on Schedule G: E	Executory Contracts and Unexpired Leases.	de any vehicles you own that
Someone else dri  Cars, vans, tr  No Yes  Watercraft, ai Examples: Boa No Yes  Add the dolla pages you ha	ives. If you lease a vehicle, also report it on Schedule G: Erucks, tractors, sport utility vehicles, motorcycles  ircraft, motor homes, ATVs and other recreational vehicles, trailers, motors, personal watercraft, fishing vessels, so are value of the portion you own for all of your entries from a vehicles for Part 2. Write that number here	icles, other vehicles, and accessories nowmobiles, motorcycle accessories	de any vehicles you own that
Someone else dri  Cars, vans, tr  No Yes  Watercraft, ai Examples: Boa No Yes  Add the dolla pages you ha	ives. If you lease a vehicle, also report it on Schedule G: Erucks, tractors, sport utility vehicles, motorcycles  ircraft, motor homes, ATVs and other recreational vehicles, trailers, motors, personal watercraft, fishing vessels, srate, trailers, motors, personal watercraft, fishing vessels, srate value of the portion you own for all of your entries frave attached for Part 2. Write that number here	icles, other vehicles, and accessories nowmobiles, motorcycle accessories  rom Part 2, including any entries for	\$0.00
Someone else dri  Cars, vans, tr  No Yes  Watercraft, ai Examples: Boa No Yes  Add the dolla pages you ha  Part 3: Describe Do you own or	ives. If you lease a vehicle, also report it on Schedule G: Erucks, tractors, sport utility vehicles, motorcycles  ircraft, motor homes, ATVs and other recreational vehicles, trailers, motors, personal watercraft, fishing vessels, so ar value of the portion you own for all of your entries for ave attached for Part 2. Write that number here	icles, other vehicles, and accessories nowmobiles, motorcycle accessories  rom Part 2, including any entries for	
Someone else dri  Cars, vans, tr  No Yes  Watercraft, ai Examples: Boa No Yes  Add the dolla pages you ha  Part 3: Describe Do you own or	ives. If you lease a vehicle, also report it on Schedule G: Erucks, tractors, sport utility vehicles, motorcycles  ircraft, motor homes, ATVs and other recreational vehicles, trailers, motors, personal watercraft, fishing vessels, so ar value of the portion you own for all of your entries for ave attached for Part 2. Write that number here	icles, other vehicles, and accessories nowmobiles, motorcycle accessories  rom Part 2, including any entries for	\$0.00  Current value of the portion you own?  Do not deduct secured

Examples: Televisions and radios; audio, video, stereo, and digital equipment; computers, printers, scanners; music collections; electronic devices including cell phones, cameras, media players, games

☐ No

Yes. Describe.....

Debtor 1	Tristan J. Benozer		Case number	(if known)
	Televis	ion, computer, printer		\$1,000.00
			ks, pictures, or other art objects; sta	amp, coin, or baseball card collections;
■ No	other collections, memo	rabilia, collectibles		
☐ Yes	. Describe			
	nent for sports and hobbie oles: Sports, photographic, ex musical instruments	<b>s</b> xercise, and other hobby equipment; b	icycles, pool tables, golf clubs, skis	; canoes and kayaks; carpentry tools;
	. Describe			
10. <b>Firea</b> ı <i>Exan</i> ■ No		s, ammunition, and related equipment		
	. Describe			
11. <b>Cloth</b> <i>Exan</i> □ No		, leather coats, designer wear, shoes,	accessories	
	. Describe			
	Miscell	aneous clothing		\$1,000.00
12. <b>Jewe</b> l <i>Exan</i> ■ No		ume jewelry, engagement rings, wedd	ing rings, heirloom jewelry, watches	s, gems, gold, silver
☐ Yes	. Describe			
Exan	arm animals nples: Dogs, cats, birds, hors	es		
■ No □ Yes	. Describe			
14. <b>Any c</b> ■ No	ther personal and househo	old items you did not already list, in	cluding any health aids you did n	not list
☐ Yes	. Give specific information			
		our entries from Part 3, including an		\$3,000.00
Part 4: D	escribe Your Financial Assets			
Do you o	wn or have any legal or eq	uitable interest in any of the followi	ng?	Current value of the portion you own? Do not deduct secured claims or exemptions.
□ No		ur wallet, in your home, in a safe depos	sit box, and on hand when you file y	our petition
			Cash	\$100.00
		other financial accounts; certificates of		okerage houses, and other similar
□ No	institutions. If you have	e multiple accounts with the same insti	tution, list each.	

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Official Form 106A/B

Schedule A/B: Property

De	ebtor 1 Tristan J. Be	enozer		Case number (if known)	
	■ Yes		Institution name:		
		17.1. Checking	HSBC Bank		\$10,000.00
					<b>.</b>
		17.2. Savings	HSBC Bank		\$2,500.00
18.	Examples: Bond funds,	or publicly traded stocks investment accounts with bro	okerage firms, money market ac	counts	
	■ No □ Yes	Institution or issuer	name:		
19.	. Non-publicly traded sto joint venture □ No	ock and interests in incorp	orated and unincorporated bu	sinesses, including an interest in an	LLC, partnership, and
	■ Yes. Give specific info	ormation about them Name of entity:		% of ownership:	
		Visionary Growth S 2 Northside Piers	trategies LLC		
		# 26M Brooklyn, NY 11249		100 %	\$0.00
21.		Issuer name:	103(b), thrift savings accounts, o	r other pension or profit-sharing plans	
	■ No □ Yes. List each accoun		Institution name:	, out of position of provide or an angle provide	
22.		prepayments d deposits you have made so	o that you may continue service	or use from a company er), telecommunications companies, or	others
	■ No □ Yes		Institution name or indivi	dual:	
23.	_ `	or a periodic payment of mone	ey to you, either for life or for a n	umber of years)	
	■ No □ Yes Iss	suer name and description.			
24.	. Interests in an education 26 U.S.C. §§ 530(b)(1), §		ualified ABLE program, or und	der a qualified state tuition program.	
	■ No □ YesIns	stitution name and description	n. Separately file the records of	any interests.11 U.S.C. § 521(c):	
25.	Trusts, equitable or fut	ture interests in property (o	other than anything listed in lir	ne 1), and rights or powers exercisab	ole for your benefit
	☐ Yes. Give specific info	ormation about them			
26.			nd other intellectual property eds from royalties and licensing a	agreements	
	☐ Yes. Give specific info	ormation about them			

Debtor 1	Tristan J. Benozer		Case number (if known)					
Exam ■ No	···							
⊔ Yes	. Give specific information about	them						
Money or	r property owed to you?			Current value of the portion you own?  Do not deduct secured claims or exemptions.				
☐ No	efunds owed to you  Give specific information about t	hem, including whether you already fi	led the returns and the tax years					
		2017 Tax Refund	Federal	\$9,142.00				
		2017 Tax Refund	State	\$3,104.00				
■ No □ Yes  30. Other Exam ■ No □ Yes  31. Intere	amounts someone owes you nples: Unpaid wages, disability insbenefits; unpaid loans you of Give specific information	surance payments, disability benefits, made to someone else	aintenance, divorce settlement, property sick pay, vacation pay, workers' compet	nsation, Social Security				
■ No	. Name the insurance company o Company	f each policy and list its value.	Beneficiary:	Surrender or refund				
If you some No	value:  32. Any interest in property that is due you from someone who has died  If you are the beneficiary of a living trust, expect proceeds from a life insurance policy, or are currently entitled to receive property because someone has died.							
Exam ■ No		or not you have filed a lawsuit or noutes, insurance claims, or rights to su						
■ No	contingent and unliquidated cl	aims of every nature, including cou	interclaims of the debtor and rights to	set off claims				
■ No	inancial assets you did not alread.  Give specific information	ady list						
36. <b>Add</b>	36. Add the dollar value of all of your entries from Part 4, including any entries for pages you have attached for Part 4. Write that number here							

Official Form 106A/B page 4 Schedule A/B: Property

Debt	or 1 Tristan J. Benozer		Case number (if known)	
Part :	Describe Any Business-Related Property You Own or Have an Inter	rest In. List any real est	ate in Part 1.	
37 <b>D</b>	o you own or have any legal or equitable interest in any business-relat	ed property?		
_	No. Go to Part 6.	eu property:		
	Yes. Go to line 38.			
Part	Describe Any Farm- and Commercial Fishing-Related Property You If you own or have an interest in farmland, list it in Part 1.	ı Own or Have an Intere	st In.	
46. <b>C</b>	o you own or have any legal or equitable interest in any farm-	or commercial fishing	ng-related property?	
	No. Go to Part 7.			
	☐ Yes. Go to line 47.			
Part	Describe All Property You Own or Have an Interest in That Yo	u Did Not List Above		
	to you have other property of any kind you did not already list Examples: Season tickets, country club membership  No	?		
	Yes. Give specific information			
54.	Add the dollar value of all of your entries from Part 7. Write th	nat number here		\$0.00
Part	List the Totals of Each Part of this Form			
55.	Part 1: Total real estate, line 2			\$0.00
56.	Part 2: Total vehicles, line 5	\$0.00	_	Ψ0.00
57.	Part 3: Total personal and household items, line 15	\$3,000.00		
58.	Part 4: Total financial assets, line 36	\$24,846.00		
59.	Part 5: Total business-related property, line 45	\$0.00		
60.	Part 6: Total farm- and fishing-related property, line 52	\$0.00		
61.	Part 7: Total other property not listed, line 54 +	\$0.00		
62.	Total personal property. Add lines 56 through 61	\$27,846.00	Copy personal property total	\$27,846.00
63.	Total of all property on Schedule A/B. Add line 55 + line 62			\$27,846.00
				· .

						-
		mation to identify your c	ase:			
De	ebtor 1	Tristan J. Benozer	Middle Name	Last Name		
	ebtor 2	First Name				
	ouse if, filing)		Middle Name	Last Name		
Un	ited States B	ankruptcy Court for the:	EASTERN DISTRICT OF	NEW YORK		
	nse number nown)					☐ Check if this is an amended filing
O	fficial Fo	orm 106C				
		<del></del>	nerty You C	laim as Exempt		4/16
cas For spe any fun exe	e number (if he number (if he number (if he number of he	known).  f property you claim as e imount as exempt. Altern statutory limit. Some exei unlimited in dollar amoui	xempt, you must specify atively, you may claim th nptions—such as those nt. However, if you claim	the amount of the exemption your full fair market value of the profor health aids, rights to receive an exemption of 100% of fair market	ou claim. operty be certain k arket valu	One way of doing so is to state a sing exempted up to the amount of benefits, and tax-exempt retirement are under a law that limits the t, your exemption would be limited
Pa	rt 1: Ident	ify the Property You Clai	n as Exempt			
1.	Which set of	of exemptions are you cla	iming? Check one only, e	even if your spouse is filing with yo	u.	
	☐ You are o	claiming state and federal r	onbankruptcy exemptions	. 11 U.S.C. § 522(b)(3)		
	You are o	claiming federal exemptions	s. 11 U.S.C. § 522(b)(2)			
2.	For any pro	perty you list on Schedu	le A/B that you claim as	exempt, fill in the information be	low.	
		tion of the property and line 3 that lists this property	on Current value of the portion you own	e Amount of the exemption you	laim	Specific laws that allow exemption
			Copy the value from Schedule A/B	Check only one box for each exe	mption.	
	Miscellane furnishing	eous household goods Is	and \$1,000.00	<u> </u>	00.00	11 U.S.C. § 522(d)(3)

Line from Schedule A/B: 6.1 100% of fair market value, up to any applicable statutory limit Television, computer, printer 11 U.S.C. § 522(d)(3) \$1,000.00 \$1,000.00 Line from Schedule A/B: 7.1 100% of fair market value, up to any applicable statutory limit Miscellaneous clothing 11 U.S.C. § 522(d)(3) \$1,000.00 \$1,000.00 Line from Schedule A/B: 11.1 100% of fair market value, up to any applicable statutory limit Cash 11 U.S.C. § 522(d)(5) \$100.00 \$100.00 Line from Schedule A/B: 16.1 100% of fair market value, up to any applicable statutory limit **Checking: HSBC Bank** 11 U.S.C. § 522(d)(5) \$10,000.00 \$10,000.00 Line from Schedule A/B: 17.1 100% of fair market value, up to any applicable statutory limit

De	btor 1 <b>Tr</b> i	istan J. Benozer			Case number (if known)	
		ription of the property and line on A/B that lists this property	Current value of the Amount of the exemption you claim portion you own		Specific laws that allow exemption	
			Copy the value from Schedule A/B	Che	ck only one box for each exemption.	
	_	s: HSBC Bank Schedule A/B: 17.2	\$2,500.00		\$2,500.00	11 U.S.C. § 522(d)(5)
	Line nom	Generale 7/B. 1112			100% of fair market value, up to any applicable statutory limit	
		: 2017 Tax Refund	\$9,142.00		\$500.00	11 U.S.C. § 522(d)(5)
	Line from	Schedule A/B: <b>28.1</b>			100% of fair market value, up to any applicable statutory limit	
	State: 2017 Tax Refund Line from Schedule A/B: 28.2		\$3,104.00		\$0.00	11 U.S.C. § 522(d)(5)
	Line nom	Scriedule AVB. 20:2			100% of fair market value, up to any applicable statutory limit	
3.		claiming a homestead exemption to adjustment on 4/01/19 and every			ed on or after the date of adjustme	nt.)
	No					
	☐ Yes	. Did you acquire the property cove	red by the exemption wi	thin 1	,215 days before you filed this case	?
		No				
		Yes				

Fill in this information to identify your case:									
Debtor 1	Debtor 1 Tristan J. Benozer								
	First Name	Middle Name	Last Name						
Debtor 2									
(Spouse if, filing)	First Name	Middle Name	Last Name						
United States Bankruptcy Court for the:		EASTERN DISTRICT C	PF NEW YORK						
Case number				☐ Check if this is ar amended filing	า				

### Official Form 106D

### Schedule D: Creditors Who Have Claims Secured by Property

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it out, number the entries, and attach it to this form. On the top of any additional pages, write your name and case number (if known).

- 1. Do any creditors have claims secured by your property?
  - No. Check this box and submit this form to the court with your other schedules. You have nothing else to report on this form.
  - ☐ Yes. Fill in all of the information below.

Fill in t	his information to identify you	r case:					
Debtor	1 Tristan J. Benoz	'er					
	First Name	Middle Nam	e	Last Name			
Debtor							
(Spouse if	f, filing) First Name	Middle Nam	e	Last Name			
United :	States Bankruptcy Court for the:	EASTERN DIS	STRICT OF NEV	N YORK			
Case n	umber						
(if known)							Check if this is an
						;	amended filing
Ott: -:-	- L						
	al Form 106E/F	A//	l	Ol-:			40/45
	dule E/F: Creditors \ mplete and accurate as possible. \( \)						12/15
left. Attac	e D: Creditors Who Have Claims Sech the Continuation Page to this pad case number (if known).	age. If you have no	information to re				
Part 1:							
_	any creditors have priority unsecu	red claims against y	you?				
	No. Go to Part 2.						
Part 2:	List All of Your NONPRIOR	ITY Unsecured C	laims				
3. Do a	any creditors have nonpriority uns	ecured claims agai	nst you?				
□ 1	No. You have nothing to report in this	part. Submit this for	m to the court with	your other sche	edules.		
	Yes.						
unse	all of your nonpriority unsecured ecured claim, list the creditor separate none creditor holds a particular claim 2.	ely for each claim. Fo	or each claim listed	d, identify what t	type of claim it is. Do not list	claims already in	cluded in Part 1. If more
							Total claim
4.1	American Express	La	ast 4 digits of acc	count number	2009		\$15,702.00
	Nonpriority Creditor's Name		(h	4 ! 10	2047		
	P.O. Box 1270 Newark, NJ 07101-1270	vv	hen was the deb	t incurrea?	2017		_
	Number Street City State Zip Code	A	s of the date you	file, the claim i	is: Check all that apply		
	Who incurred the debt? Check one	э.					
	Debtor 1 only		Contingent				
	Debtor 2 only		Unliquidated				
	Debtor 1 and Debtor 2 only		Disputed				
	$\square$ At least one of the debtors and a	nother T	ype of NONPRIOR	RITY unsecured	d claim:		
	$\square$ Check if this claim is for a cor	<sub>mmunity</sub> [	Student loans				
	debt Is the claim subject to offset?		0		ration agreement or divorce	that you did not	
	No		port as priority cla		g plans, and other similar de	hts	
	Yes		Other. Specify	credit card	purcnases		

Tristan J. Benozer	Case number (if known)	Case number (if known)					
American Express	Last 4 digits of account number 2008	\$32,588.00					
P.O. Box 1270	When was the debt incurred? 2017						
Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply						
Debtor 1 only	☐ Contingent						
Debtor 2 only							
☐ Debtor 1 and Debtor 2 only	☐ Disputed						
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:						
☐ Check if this claim is for a community	☐ Student loans						
debt Is the claim subject to offset?	$\hfill \square$ Obligations arising out of a separation agreement or divorce report as priority claims	that you did not					
No	$\square$ Debts to pension or profit-sharing plans, and other similar de	bts					
☐ Yes	Other. Specify Credit card purchases						
American Express	Last 4 digits of account number 3001	\$27.00					
P.O. Box 1270	When was the debt incurred? 2017						
Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply						
Debtor 1 only	☐ Contingent						
☐ Debtor 2 only	☐ Unliquidated						
☐ Debtor 1 and Debtor 2 only	☐ Disputed						
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	••					
☐ Check if this claim is for a community	☐ Student loans ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts						
debt Is the claim subject to offset?							
■ No							
□Yes	■ Other. Specify Credit card purchases						
Bryan Gartner	Last 4 digits of account number	\$24,000.00					
325 Fifth Ave. Apt. 36	When was the debt incurred? 2016						
New York, NY 10016  Number Street City State Zip Code  Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply						
■ Debtor 1 only	☐ Contingent						
<u> </u>							
	Type of NONPRIORITY unsecured claim:						
	☐ Student loans						
debt Is the claim subject to offset?	$\hfill \square$ Obligations arising out of a separation agreement or divorce report as priority claims	that you did not					
■ No	$\square$ Debts to pension or profit-sharing plans, and other similar de	bts					
Yes	Other. Specify Personal Loan						
	Nonpriority Creditor's Name P.O. Box 1270 Newark, NJ 07101-1270 Number Street City State Zip Code Who incurred the debt? Check one.  Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? No Yes  American Express Nonpriority Creditor's Name P.O. Box 1270 Newark, NJ 07101-1270 Number Street City State Zip Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? No Yes  Bryan Gartner Nonpriority Creditor's Name 325 Fifth Ave. Apt. 36 New York, NY 10016 Number Street City State Zip Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 only Debtor 2 only Check if this claim is for a community debt Is the claim subject to offset? Check if this claim is for a community debt Is the claim subject to offset? Check if this claim is for a community debt Is the claim subject to offset? No Debtor 1 only Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? No	American Express Nonpriority Creditor's Name P.O. Box 1270 Number Street City State Zip Code Who incurred the debt? Check one. Debtor 1 only Debtor 1 only Debtor 1 and Debtor 2 only Debtor 2 only Debtor 1 only Debtor 2 only Nonpriority Creditor's Name P.O. Box 1270 Number Street City State Zip Code Who incurred the debt? Debtor 1 only Debtor 1 only Debtor 1 only Debtor 1 only Debtor 2 only Nonpriority Creditor's Name P.O. Box 1270 Newark, N.J 07101-1270 Number Street City State Zip Code Who incurred the debt? Nonpriority Creditor's Name P.O. Box 1270 Newark, N.J 07101-1270 Number Street City State Zip Code Who incurred the debt? Debtor 1 only Debtor 1 only Debtor 1 only Debtor 1 only Debtor 2 only Nonpriority Creditor's Name P.O. Box 1270 Newark, N.J 07101-1270 Number Street City State Zip Code Who incurred the debt? Debtor 1 only Debtor 1 only Debtor 2 only Creditor's Name P.O. Box 1270 Nonpriority Creditor's Name Contingent Debtor 2 only Creditor's Name Debtor 2 only Contingent Debtor 2 only Contingent Debtor 3 only Contingent Debtor 3 only Contingent Debtor 4 only Contingent Debtor 4 only Contingent Debtor 5 only Contingent Debtor 5 only Contingent Debtor 6 only Contingent Debtor 6 only Contingent Debtor 7 only Contingent Debtor 1 only Contingent Debtor 2 only Contingent Debtor 1 only Contingent Debtor 1 only Contingent Debtor 2 only Contingent Debtor 2 only Contingent Debtor 3 only Contingent Debtor 4 only Contingent Debtor 5 only Contingent					

Debto	Tristan J. Benozer	Case number (if known)					
4.5	Chase Bank USA NA	Last 4 digits of account number 2817	\$58,879.00				
	Nonpriority Creditor's Name PO Box 15153	When was the debt incurred? 2017					
	Wilmington, DE 19886-5153  Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply					
	Who incurred the debt? Check one.	no or and date you may and diamned oncome an area appropriate					
	■ Debtor 1 only	☐ Contingent					
	Debtor 2 only	☐ Unliquidated					
	☐ Debtor 1 and Debtor 2 only	□ Disputed					
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:					
	☐ Check if this claim is for a community	☐ Student loans					
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims					
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts					
	□Yes	Other. Specify Credit card purchases					
4.6	Great Lakes Nonpriority Creditor's Name	Last 4 digits of account number	\$32,818.00				
	P.O. Box 7860 Madison, WI 53707-7860	When was the debt incurred?					
	Number Street City State Zip Code  Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply					
	■ Debtor 1 only	☐ Contingent					
	Debtor 2 only	☐ Unliquidated ☐ Disputed  Type of NONPRIORITY unsecured claim: ■ Student loans					
	☐ Debtor 1 and Debtor 2 only						
	☐ At least one of the debtors and another						
	☐ Check if this claim is for a community						
	debt Is the claim subject to offset?	Dobligations arising out of a separation agreement or divorce that you did not report as priority claims					
	No	Debts to pension or profit-sharing plans, and other similar debts					
	Yes	☐ Other. Specify					
		Student loan					
4.7	Lending Club Corporation  Nonpriority Creditor's Name	Last 4 digits of account number 0805	\$20,775.00				
	P.O. Box 39000 San Francisco, CA 94139	When was the debt incurred? 2017					
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply					
	Debtor 1 only	☐ Contingent					
	☐ Debtor 2 only	☐ Unliquidated					
	☐ Debtor 1 and Debtor 2 only						
	$\square$ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:					
	$\square$ Check if this claim is for a community	Student loans					
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims					
	■ No	lacksquare Debts to pension or profit-sharing plans, and other similar debts					
	Yes	■ Other. Specify Credit card purchases					

Debtor '	Tristan J.	Benozer		Case n	umber (if I	(nown)			
		n / Suntrust	Last 4 digits of account number	0319	)		\$23,484.00		
	Nonpriority Cred 303 Peacht Atlanta, GA	ree Street, NE	When was the debt incurred?						
		City State Zip Code	As of the date you file, the claim	is: Checl	k all that ar	ply			
		the debt? Check one.	•		•				
	Debtor 1 on	ly	☐ Contingent						
	Debtor 2 on	ly	☐ Unliquidated						
	Debtor 1 and	d Debtor 2 only	☐ Disputed						
	☐ At least one	of the debtors and another	Type of NONPRIORITY unsecure	d claim:					
	☐ Check if thi	s claim is for a community	☐ Student loans						
	debt	bject to offset?	Obligations arising out of a sepreport as priority claims	aration aç	greement o	r divorce that you did not			
	No	bject to onset:	Debts to pension or profit-shari	ng plans,	and other	similar debts			
	☐ Yes		Other Specify Personal L	.oan					
4.9	Pay Pal		Last 4 digits of account number	7833	}		\$2,409.00		
	Nonpriority Cred 2211 North	First St.	When was the debt incurred?	2017	,				
-		City State Zip Code the debt? Check one.	As of the date you file, the claim	As of the date you file, the claim is: Check all that apply					
	Debtor 1 on	ly	☐ Contingent						
	Debtor 2 on	ly	☐ Unliquidated ☐ Disputed Type of NONPRIORITY unsecured claim:						
	Debtor 1 and	d Debtor 2 only							
	☐ At least one	of the debtors and another							
	☐ Check if thi	s claim is for a community	☐ Student loans						
	debt Is the claim su	bject to offset?	<ul> <li>☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims</li> <li>☐ Debts to pension or profit-sharing plans, and other similar debts</li> <li>☐ Other. Specify</li> </ul>						
	No								
	☐ Yes								
- A	<b>-</b>								
is tryin have m notified Part 4:	s page only if y ag to collect fro nore than one o d for any debts	m you for a debt you owe to son reditor for any of the debts that in Parts 1 or 2, do not fill out or mounts for Each Type of Uns	out your bankruptcy, for a debt that neone else, list the original creditor in you listed in Parts 1 or 2, list the add submit this page.	n Parts 1 itional cr	or 2, then reditors he	list the collection agency here. If you do not have additio	re. Similarly, if you on all persons to be		
	ne amounts of f unsecured cla		ns. This information is for statistical	reporting	purposes	s only. 28 U.S.C. §159. Add the	amounts for each		
						Total Claim			
	6a. fotal nims	Domestic support obligations		6a.	\$	0.00			
from Pa		Taxes and certain other debts	you owe the government	6b.	\$	0.00			
	6c.	Claims for death or personal injury while you were intoxicated		6c.	\$	0.00			
	6d.	Other. Add all other priority unse	cured claims. Write that amount here.	6d.	\$	0.00	٦		
	6e.	Total Priority. Add lines 6a through 6d.			\$	0.00			
						Total Claim			
	6f.	Student loans		6f.	\$	32,818.00			
from Pa	nims art 2 6g.	Obligations arising out of a se	paration agreement or divorce that	_		0.00			
	6h.	you did not report as priority c		6g. 6h.	\$ \$	0.00			
	OII.	- colo lo ponoron oi pront-onai	g p.a.io, ana outoi oiiiniai acbio	O11.	Ψ	V.UU			

6i.

Other. Add all other nonpriority unsecured claims. Write that amount

here.

6i.

177,864.00

6j. Total Nonpriority. Add lines 6f through 6i.

5j. \$ **210,682.00** 

Fill in this information to identify your case:								
Debtor 1	for 1 Tristan J. Benozer							
	First Name	Middle Name	Last Name					
Debtor 2								
(Spouse if, filing)	First Name	Middle Name	Last Name					
United States Bankruptcy Court for the:		EASTERN DISTRICT C	F NEW YORK					
Case number	Case number							
(if known)						Check if this is an		
						amended filing		

### Official Form 106G

## **Schedule G: Executory Contracts and Unexpired Leases**

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
  - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
  - Tyes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

	Person or	company with	h whom you have the er, Street, City, State and ZIP C	contract or lease	State what the contract or lease is for
2.1					
	Name				<del>_</del>
	Number	Street			_
	City		State	ZIP Code	
2.2					_
	Name				
	Number	Street			_
	City		State	ZIP Code	
2.3	<u> </u>		Olato	2 0000	
	Name				
	Number	Street			_
	City		State	ZIP Code	_
2.4					
	Name				_
	Number	Street			_
	City		State	ZIP Code	_
2.5	•				
0	Name				_
	Number	Street			_
	City		State	ZIP Code	<u> </u>
	Jily		Cidio		

Fill in this	information to identify your	case:			
Debtor 1	Tristan J. Benoze	er			
	First Name	Middle Name	Last Name		
Debtor 2	. <del></del>				
(Spouse if, filin	g) First Name	Middle Name	Last Name		
United Stat	tes Bankruptcy Court for the:	EASTERN DISTRICT (	OF NEW YORK		
O					
Case numb (if known)	Der				☐ Check if this is an
					amended filing
					-
Official	Form 106H				
Sched	ule H: Your Cod	ebtors			12/15
fill it out, ar your name	nd number the entries in the and case number (if known)	boxes on the left. Attac . Answer every question	h the Additional Page to 1.	o this page. On the top o	ded, copy the Additional Page, f any Additional Pages, write
1. Do y	you have any codebtors? (If	you are filing a joint case,	do not list either spouse	as a codebtor.	
■ No					
☐ Yes					
Arizona  No.	nin the last 8 years, have you a, California, Idaho, Louisiana, Go to line 3.  Did your spouse, former spouse.	, Nevada, New Mexico, Pr	uerto Rico, Texas, Washi		tates and territories include
in line Form 1	2 again as a codebtor only i	f that person is a guarai	ntor or cosigner. Make s	sure you have listed the	vith you. List the person shown creditor on Schedule D (Official hedule E/F, or Schedule G to fill
	Column 1: Your codebtor				tor to whom you owe the debt
N	Name, Number, Street, City, State and Z	IP Code		Check all schedules t	hat apply:
3.1				☐ Schedule D, line	
	Name			_ ☐ Schedule E/F, line	
				☐ Schedule G, line	· · · · · · · · · · · · · · · · · · ·
<del>-</del>	Number Street			_	
	City	State	ZIP Code		
				Польть в п	
3.2	Name			Schedule D, line	
				☐ Schedule E/F, line☐ Schedule G, line	·
_				– Schedule G, iifle	
	Number Street City	State	ZIP Code		
•	•				

Fill	in this information to identify your c	250.								
	btor 1 Tristan J. Bo									
	btor 2 buse, if filing)									
Un	ited States Bankruptcy Court for the	EASTERN DISTRICT	OF NEW YORK							
1	se number 		-					ed filing ent showir	ng postpetition	
0	fficial Form 106I					_	MM / DD/ \		ollowing date.	
	chedule I: Your Inc	ome				I	יוטט / ואווא	1111		12/15
spo	plying correct information. If you use. If you are separated and you ch a separate sheet to this form.  Describe Employment	ır spouse is not filing w	ith you, do not inclu	ude infor	mati	on abou	it your spe	ouse. If m	ore space is	needed,
1.	Fill in your employment information.		Debtor 1				Debtor 2	2 or non-f	iling spouse	
	If you have more than one job,	Employment status	■ Employed				☐ Empl	oyed		
	attach a separate page with information about additional	Employment status	☐ Not employed				☐ Not e	mployed		
	employers.  Include part-time, seasonal, or	Occupation	Director of Pro Management	duct						
	self-employed work.	Employer's name	Dashlane S.A.S	<b>S</b> .						
	Occupation may include student or homemaker, if it applies.	Employer's address	21 Rue Pierre F 2nd Floor PARIS, FRANC		8					
		How long employed t	here? 4 mon	ths			_			
Pa	rt 2: Give Details About Mor	nthly Income								
	imate monthly income as of the duse unless you are separated.	ate you file this form. If	you have nothing to	report for	any	line, writ	e \$0 in the	space. In	clude your no	n-filing
	ou or your non-filing spouse have me e space, attach a separate sheet to		ombine the information	on for all	empl	oyers foi	that perso	on on the li	nes below. If	you need
						For De	btor 1		btor 2 or ing spouse	
2.	List monthly gross wages, sala deductions). If not paid monthly,			2.	\$		9,780.00	\$	N/A	
3.	Estimate and list monthly overt	ime pay.		3.	+\$		0.00	+\$	N/A	
4.	Calculate gross Income. Add lin	ne 2 + line 3.		4.	\$	9,7	80.00	\$	N/A	

				- 1	For	Debtor 1	F	or Debtor	2 or	
							_	on-filing s	spouse	
	Copy	y line 4 here	4.	,	\$_	9,780.00	\$		N/A	<u>\</u>
5.	List a	all payroll deductions:								
	5a.	Tax, Medicare, and Social Security deductions	5a.		\$	2,037.00	\$		N/A	
	5b.	Mandatory contributions for retirement plans	5b.		\$_	0.00	\$		N/A	
	5c.	Voluntary contributions for retirement plans	5c.	9	\$ *	0.00	\$		N/A	_
	5d.	Required repayments of retirement fund loans	5d.		\$ 	0.00	\$		N/A	_
	5e.	Insurance	5e.		· \$	0.00	\$		N/A	_
	5f.	Domestic support obligations	5f.		\$ _	0.00	\$		N/A	_
	5g.	Union dues	5g.		\$ _	0.00	\$		N/A	_
	5h.	Other deductions. Specify:	5h.		$\mathring{\$}^-$	0.00	٠.		N/A	_
6.		the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	— 6.	9	_	2,037.00	\$		N/A	_
7.		•	7.	9	_		\$			_
1.		ulate total monthly take-home pay. Subtract line 6 from line 4.	7.	4	P	7,743.00	Ф		N/A	<u>\</u>
8.	List a 8a.	all other income regularly received:  Net income from rental property and from operating a business, profession, or farm  Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total	0-	,	<b>c</b>	0.00	¢.		AL/A	
	O.L	monthly net income.	8a.		\$	0.00	\$		N/A	
	8b.	Interest and dividends	8b.	. ;	\$_	0.00	\$		N/A	<u>\</u>
	8c.	Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.	8c.	,	\$	0.00	\$		N/A	
	8d.	Unemployment compensation	8d.		\$ _	0.00	\$		N/A	
	8e.	Social Security	8e.		\$ -	0.00	\$		N/A	_
	8f.	Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies.  Specify:			\$	0.00	\$		N/A	_
	8g.	Pension or retirement income	8g.		\$	0.00	\$		N/A	<u> </u>
	8h.	Other monthly income. Specify:	8h.	+ 3	\$	0.00	+ \$		N/A	<u> </u>
				Г						
9.	Add	all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.	\$	_	0.00	\$		N/	Α
10.		ulate monthly income. Add line 7 + line 9. the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.	10.	\$		7,743.00 + \$		N/A	= \$_	7,743.00
11.	State Include other	e all other regular contributions to the expenses that you list in <i>Schedule</i> de contributions from an unmarried partner, members of your household, your friends or relatives.  ot include any amounts already included in lines 2-10 or amounts that are not	depe					Schedul	le J. +\$	0.00
12.		the amount in the last column of line 10 to the amount in line 11. The reset that amount on the Summary of Schedules and Statistical Summary of Certaines							\$	7,743.00
									Combi	ined ly income
13.	Do y∈	ou expect an increase or decrease within the year after you file this form  No.  Yes. Explain:	?							

Fill	in this information to identify your case:				
Deb	tor 1 Tristan J. Benozer		Che	ck if this is:	
Dob	otor 2	_	_	An amended filing	ving postpetition chapter
	ouse, if filing)			13 expenses as of	
Unit	ed States Bankruptcy Court for the: EASTERN DISTRICT OF NEW YO	RK		MM / DD / YYYY	
Cas	e number				
(If k	nown)				
O.	fficial Form 106J				
	chedule J: Your Expenses				12/15
Be info nur	as complete and accurate as possible. If two married people are ormation. If more space is needed, attach another sheet to this fon mber (if known). Answer every question.				
Par 1.	t 1: Describe Your Household Is this a joint case?				
	■ No. Go to line 2.  ☐ Yes. Does Debtor 2 live in a separate household?				
	☐ No ☐ Yes. Debtor 2 must file Official Form 106J-2, <i>Expenses f</i>	or Separate House	<i>hold</i> of Deb	otor 2.	
2.	Do you have dependents? ■ No				
	Do not list Debtor 1 and Debtor 2. Fill out this information for each dependent	Dependent's relation		Dependent's age	Does dependent live with you?
	Do not state the				□ No
	dependents names.				☐ Yes
					□ No □ Yes
					□ No
					☐ Yes
					□ No
3.	Do your expenses include				☐ Yes
Э.	expenses of people other than yourself and your dependents?				
Est	t 2: Estimate Your Ongoing Monthly Expenses imate your expenses as of your bankruptcy filing date unless your expenses as of a date after the bankruptcy is filed. If this is a supple blicable date.	u are using this fo emental <i>Schedul</i> e	orm as a si J, check t	upplement in a Cha he box at the top o	upter 13 case to report f the form and fill in the
the	lude expenses paid for with non-cash government assistance if value of such assistance and have included it on Schedule I: Yoficial Form 106I.)			Your expe	enses
4.	The rental or home ownership expenses for your residence. Incompayments and any rent for the ground or lot.	clude first mortgage	4. :	\$	1,972.00
	If not included in line 4:				
	4a. Real estate taxes		4a.		0.00
	4b. Property, homeowner's, or renter's insurance		4a. 4b. 4	·	0.00
	4c. Home maintenance, repair, and upkeep expenses		4c.		0.00
	4d. Homeowner's association or condominium dues		4d.		0.00
5.	Additional mortgage payments for your residence, such as hom	ne equity loans	5.	\$	0.00

Debtor 1	Tristan J	. Benozer	Case num	nber (if known)	
1 14!!!	tion.				
6. <b>Utili</b> 6a.	ties: Flectricity.	heat, natural gas	6a.	\$	100.00
6b.	•	ver, garbage collection	6b.		0.00
6c.		e, cell phone, Internet, satellite, and cable services	6c.		100.00
6d.	Other. Spe		6d.	·	0.00
		ekeeping supplies	od. 7.	·	
				· -	600.00
		hildren's education costs	8.		0.00
		ry, and dry cleaning	9.		175.00
	•	roducts and services	10.	·	175.00
		ntal expenses	11.	\$	0.00
	-	Include gas, maintenance, bus or train fare.	12.	\$	200.00
	not include ca			· <u> </u>	
		clubs, recreation, newspapers, magazines, and book		· <u> </u>	300.00
		ributions and religious donations	14.	\$	0.00
i. Insu		ourones deducted from your new or included in lines 4 or	20		
	not include in Life insura	surance deducted from your pay or included in lines 4 or		¢	0.00
			15a.	· -	0.00
	Health insu		15b.	·	0.00
	Vehicle ins		15c.	·	0.00
		rance. Specify: Apartment insurance	15d.	\$	20.00
		clude taxes deducted from your pay or included in lines 4 ne taxes not deducted from pay check	or 20. 16.	\$	3,097.00
		ease payments:			
		ents for Vehicle 1	17a.	·	0.00
		ents for Vehicle 2	17b.	\$	0.00
17c.	Other. Spe	ecify:	17c.	\$	0.00
17d.	Other. Spe	ecify:	17d.	\$	0.00
		of alimony, maintenance, and support that you did n your pay on line 5, <i>Schedule I, Your Income</i> (Official I		\$	0.00
		you make to support others who do not live with yo		\$	0.00
Spe	cify:		19.	-	
. Oth	er real prope	erty expenses not included in lines 4 or 5 of this form	or on Schedule I: Yo	our Income.	
20a.	Mortgages	on other property	20a.	\$	0.00
20b.	Real estate	e taxes	20b.	\$	0.00
20c.	Property, h	nomeowner's, or renter's insurance	20c.	\$	0.00
20d.	Maintenan	ce, repair, and upkeep expenses	20d.	\$	0.00
		er's association or condominium dues	20e.	\$	0.00
	er: Specify:	Student loan payment		+\$	106.00
. •	от орсспу.	Student loan payment		- Ψ	100.00
	-	nonthly expenses			
22a.	Add lines 4	through 21.		\$	6,845.00
22b.	Copy line 22	2 (monthly expenses for Debtor 2), if any, from Official Fo	orm 106J-2	\$	
22c.	Add line 22a	a and 22b. The result is your monthly expenses.		\$	6,845.00
3. Calc	ulate your r	nonthly net income.			
	-	12 (your combined monthly income) from Schedule I.	23a.	\$	7,743.00
		monthly expenses from line 22c above.	23b.	-\$	6,845.00
	1 7 7 - 01	) -	200.		
23c.		our monthly expenses from your monthly income. is your <i>monthly net income</i> .	23c.	\$	898.00
For e	example, do yo fication to the	in increase or decrease in your expenses within the your expect to finish paying for your car loan within the year or do your mortgage?			ase or decrease because of a
		F=			
□ Y	'es.	Explain here:			

Fill in this in	nformation to identify you	ır case:			
Debtor 1	Tristan J. Beno	zer			
	First Name	Middle Name	Last Name		
Debtor 2 (Spouse if, filing)	First Name	Middle Name	Last Name		
(Spouse II, IIIIIIg)	riist name	Middle Name	Last Name		
United States	s Bankruptcy Court for the	EASTERN DISTRICT (	OF NEW YORK		
Case numbe	er				
(if known)					☐ Check if this is an
					amended filing
	orm 106Dec ration About	an Individua	l Debtor's Scl	nedules	12/15
If two marrie	d people are filing togeth	ner, both are equally respo	onsible for supplying corre	ect information.	
obtaining moyears, or bot		l in connection with a ban	s or amended schedules. I kruptcy case can result in		t, concealing property, or imprisonment for up to 20
Did you	u pay or agree to pay son	neone who is NOT an atto	rney to help you fill out ba	nkruptcy forms?	
■ No	)				
☐ Ye	es. Name of person				cy Petition Preparer's Notice, Signature (Official Form 119)
	enalty of perjury, I declar y are true and correct.	re that I have read the sun	nmary and schedules filed	with this declaration and	d
X /s/	Tristan J. Benozer		X		
	stan J. Benozer nature of Debtor 1		Signature of D	Pebtor 2	
Date	e January 8, 2019		Date		

Fill in this info	rmation to identify you	ır case:		
Debtor 1	Tristan J. Beno	Zer Middle Name	Last Name	
Debtor 2	i iist ivaine	Wildle Name	Last Name	
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States B	Bankruptcy Court for the	EASTERN DISTRICT OF N	NEW YORK	
Case number (if known)				☐ Check if this is an amended filing
	t of Financial		uals Filing for Bankruptcy	
information. If number (if known	more space is needed wn). Answer every que	, attach a separate sheet to the stion.	e filing together, both are equally respons nis form. On the top of any additional page	able for supplying correct es, write your name and case
Part 1: Give	Details About Your M	arital Status and Where You I	Lived Before	
1. What is yo	our current marital stat	us?		
☐ Marrie ■ Not m				
2. During the	last 3 years, have you	ı lived anywhere other than w	here you live now?	
□ No				
	ist all of the places you	lived in the last 3 years. Do not	include where you live now.	
	, ,		,	Datas Dalitano
Deptor 1 i	Prior Address:	Dates Debtor 1 lived there	Debtor 2 Prior Address:	Dates Debtor 2 lived there
Apt. 26M	ide Piers I า, NY 11249	From-To: <b>2015 through</b> August 2018	☐ Same as Debtor 1	☐ Same as Debtor 1 From-To:
Apt. 3C	t 12th St. k, NY 10014	From-To:	☐ Same as Debtor 1	☐ Same as Debtor 1 From-To:
			al equivalent in a community property stat ada, New Mexico, Puerto Rico, Texas, Wash	
☐ Yes. M	Make sure you fill out So	hedule H: Your Codebtors (Offi	cial Form 106H).	
Part 2 Expl	ain the Sources of Yo	ur Income		
Fill in the to	otal amount of income y	ou received from all jobs and all	a business during this year or the two pr I businesses, including part-time activities. together, list it only once under Debtor 1.	evious calendar years?
□ No				
Yes. F	Fill in the details.			
		Debtor 1	Debtor 2	

Official Form 107

De	Pebtor 1 Tristan J. Benozer					Case number (if known)						
					Debtor 1					Debtor 2		
						of income that apply.	(bet	oss income fore deductions ar lusions)	nd	Sources of inc Check all that a		Gross income (before deductions and exclusions)
				■ Wages, commissions, bonuses, tips \$115,000.00				☐ Wages, commissions, bonuses, tips				
					☐ Operat	ting a business				Operating a	business	
			dar year bef December 3		■ Wages bonuses,	s, commissions, tips		\$131,241.0	00	☐ Wages, combonuses, tips	missions,	
					☐ Operat	ting a business				☐ Operating a	business	
	and winn	other nings. each s	public benef If you are fili	it payments;   ng a joint cas ne gross inco	pensions; re e and you h ome from ea	ental income; inte nave income that	rest; di		ollecte st it on	ed from lawsuits; ly once under De at you listed in lin	royalties; and ebtor 1.	curity, unemployment I gambling and lottery
					Debtor 1 Sources of Describe b		eac (bet	oss income from th source fore deductions ar lusions)	nd	Debtor 2 Sources of inc Describe below		Gross income (before deductions and exclusions)
Pa	rt 3:	List	Certain Pa	yments You	Made Befo	re You Filed for		,				
6.	Are	No.	Neither De individual puring the No. Yes  * Subject to Debtor 1 or	ebtor 1 nor D rimarily for a 90 days befo Go to line 7 List below e paid that cre not include o adjustment r Debtor 2 o 90 days befo Go to line 7 List below e	personal, fare you filed  acach credito editor. Do no payments to on 4/01/19  r both have are you filed  acach credito acach credito acach credito acach credito	for bankruptcy, d r to whom you pa ot include payme o an attorney for t and every 3 year e primarily consi for bankruptcy, d r to whom you pa omestic support of	umer d bld purp lid you p lid a tota nts for o this ban rs after umer d lid you p	lebts. Consumer of cose."  pay any creditor a all of \$6,425* or modomestic support of kruptcy case. that for cases filed lebts.  pay any creditor a all of \$600 or more	ore in obligation of total of the and	of \$6,425* or more pay tions, such as cher after the date of \$600 or more?	re? rments and th ild support ar f adjustment. you paid that	(8) as "incurred by an e total amount you and alimony. Also, do creditor. Do not aclude payments to an
	Cre	editor'	s Name and	l Address		Dates of payme	ent	Total amoun		Amount you	Was this p	ayment for
								paid	t	still owe		

7.	Inside of war a bu	hin 1 year before you filed for bankrupton ders include your relatives; any general parthich you are an officer, director, person in usiness you operate as a sole proprietor. 1 mony.	rtners; rela control, or	atives of any generatives of 20% or	eral partners; partners partners of their votin	erships of whig securities;	nich you and any	are a genera managing a	al partner; corpora gent, including on		
	=	No									
		Yes. List all payments to an insider.									
	Ins	ider's Name and Address	Dates o	f payment	Total amount paid	Amount still	•	Reason for	this payment		
В.	insi	hin 1 year before you filed for bankrupteder? ude payments on debts guaranteed or cos			ments or transfer	any propert	y on ac	count of a de	ebt that benefited	l an	
		No									
		Yes. List all payments to an insider									
	Ins	ider's Name and Address	Dates o	f payment	Total amount paid	Amount still		Reason for Include cred	this payment itor's name		
Par	t 4:	Identify Legal Actions, Repossession	ns. and Fo	reclosures							
ı		identify Legal Actions, Repossession	13, 4114 1 0	reciosares							
9.	List	hin 1 year before you filed for bankrupte all such matters, including personal injury difications, and contract disputes.									
		Yes. Fill in the details.									
		se title se number	Nature o	of the case	Court or agency	1		Status of th	e case		
10.		hin 1 year before you filed for bankrupte cck all that apply and fill in the details below		y of your prope	rty repossessed, t	foreclosed,	garnish	ed, attached	I, seized, or levie	d?	
		No. Go to line 11.  Yes. Fill in the information below.									
	Cre	editor Name and Address	Describ	e the Property			Date		Value of prop		
			Explain	what happened							
11.		Within 90 days before you filed for bankruptcy, did any creditor, including a bank or financial institution, set off any amounts from your accounts or refuse to make a payment because you owed a debt?									
		No									
	<u>С</u>	Yes. Fill in the details.	Dagarik	. th			Data a	-4: ···	A	4	
	Cre	editor Name and Address	Describ	e the action the	creditor took		taken	ction was	Amo	unt	
12.		hin 1 year before you filed for bankrupto rt-appointed receiver, a custodian, or a			rty in the possess	sion of an as	ssignee	for the bene	efit of creditors, a	ı	
		No Yes									
Par	 t 5:	_									
							#000				
ı ئ.	Witi	<b>hin 2 years before you filed for bankrup</b> No	icy, ala yo	ou give any gifts	with a total value	or more tha	an \$600	her berson	•		
		Yes. Fill in the details for each gift.									
		its with a total value of more than \$600 r person	Des	scribe the gifts			Dates the gif	you gave ts	Va	lue	
		rson to Whom You Gave the Gift and dress:									

Debtor 1 Tristan J. Benozer

Deb	otor 1 Tristan J. Benozer		Case number (if known)							
14.	Within 2 years before you filed for bank  ■ No □ Yes. Fill in the details for each gift or			ns with a total	value of more than	\$600 to any charity?				
					Dates you	Value				
	Gifts or contributions to charities that more than \$600 Charity's Name Address (Number, Street, City, State and ZIP Co		Describe what you contributed		Dates you contributed	Value				
Par	t 6: List Certain Losses	,								
15.	Within 1 year before you filed for bankri or gambling?	uptcy or	since you filed for bankruptcy, did y	ou lose anyti	ning because of thef	t, fire, other disaster,				
	■ No									
	☐ Yes. Fill in the details.									
	Describe the property you lost and	Descri	be any insurance coverage for the lo	oss	Date of your	Value of property				
	how the loss occurred	Include	e the amount that insurance has paid. Lance claims on line 33 of Schedule A/B:	ist pending	loss	lost				
Par	t 7: List Certain Payments or Transfer	rs								
		_								
16.	Within 1 year before you filed for bankru consulted about seeking bankruptcy or Include any attorneys, bankruptcy petition	preparii	ng a bankruptcy petition?			rty to anyone you				
	□ No									
	Yes. Fill in the details.									
			Description and value of any man		Data navenant	Amount of				
	Person Who Was Paid Address		Description and value of any prop- transferred	erty	Date payment or transfer was	Amount of payment				
	Email or website address				made	p.,				
	Person Who Made the Payment, if Not	You								
	Glenn L. Kantor				November	\$4,000.00				
	150 Motor Pkwy. Suite 401				2018					
	Hauppauge, NY 11788									
17.	Within 1 year before you filed for bankry promised to help you deal with your cree Do not include any payment or transfer that	editors o	r to make payments to your creditor		r transfer any propei	rty to anyone who				
	■ No □ Yes. Fill in the details.									
					_					
	Person Who Was Paid Address		Description and value of any prop transferred	erty	Date payment or transfer was made	Amount of payment				
18	Within 2 years before you filed for bank	ruptov. o	did you sell, trade, or otherwise trans	sfer any prop	erty to anyone, other	r than property				
10.	transferred in the ordinary course of yo Include both outright transfers and transfer include gifts and transfers that you have all	ur busin rs made a	ess or financial affairs? as security (such as the granting of a se							
	■ No									
	☐ Yes. Fill in the details.									
	Person Who Received Transfer		Description and value of	Describe a	ny property or	Date transfer was				
	Address		property transferred		received or debts	made				
	Person's relationship to you									

Debtor 1 Tristan J. Benozer Case number (if known)

19.	Within 10 years before you filed for bankruptcy, did you transfer any property to a self-settled trust or similar device of which you are a beneficiary? (These are often called asset-protection devices.)  No Yes. Fill in the details.										
	Name of trust	Description and v	alue of the property tr	ansferred	Date Transfer was made						
Par	List of Certain Financial Accounts, Instr	ruments, Safe Deposit	Boxes, and Storage U	Jnits							
20.	Within 1 year before you filed for bankruptcy, sold, moved, or transferred? Include checking, savings, money market, or chouses, pension funds, cooperatives, associa  No Yes. Fill in the details.	other financial accour	nts; certificates of dep		, ,						
		ast 4 digits of account number	Type of account or instrument	Date account was closed, sold, moved, or transferred	Last balance before closing or transfer						
21.	Do you now have, or did you have within 1 year before you filed for bankruptcy, any safe deposit box or other depository for securities, cash, or other valuables?										
	■ No □ Yes. Fill in the details.										
	Name of Financial Institution Address (Number, Street, City, State and ZIP Code)	Who else had acc Address (Number, State and ZIP Code)		ibe the contents	Do you still have it?						
22.	Have you stored property in a storage unit or	place other than your	home within 1 year be	efore you filed for bankruptc	y?						
	<ul><li>No</li><li>Yes. Fill in the details.</li></ul>										
	Name of Storage Facility Address (Number, Street, City, State and ZIP Code)	Who else has or had access to it? Address (Number, Street, City, State and ZIP Code)		ibe the contents	Do you still have it?						
Par	9: Identify Property You Hold or Control fo	r Someone Else									
23.	Do you hold or control any property that some for someone.	eone else owns? Inclu	ide any property you b	porrowed from, are storing fo	or, or hold in trust						
	Yes. Fill in the details.										
	Owner's Name Address (Number, Street, City, State and ZIP Code)	Where is the prop (Number, Street, City, S Code)		ibe the property	Value						
	Give Details About Environmental Information of Part 10, the following definition										
	Environmental law means any federal, state, o toxic substances, wastes, or material into the regulations controlling the cleanup of these si	or local statute or regu air, land, soil, surface	water, groundwater,								
-	Site means any location, facility, or property a to own, operate, or utilize it, including dispose	al sites.	·								
Hazardous material means anything an environmental law defines as a hazardous waste, hazardous substance, toxic substance hazardous material, pollutant, contaminant, or similar term.											

Official Form 107

Report all notices, releases, and proceedings that you know about, regardless of when they occurred.

Debtor 1 Tristan J. Benozer Case number (if known)

24.	Has any governmental unit notified you that	you may be liable or potentially liable	under or in violation of an environme	ntal law?
	■ No □ Yes. Fill in the details.			
	Name of site Address (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State and ZIP Code)	Environmental law, if you know it	Date of notice
25.	Have you notified any governmental unit of	•		
	■ No □ Yes. Fill in the details.			
	Name of site Address (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State and ZIP Code)	Environmental law, if you know it	Date of notice
26.	Have you been a party in any judicial or adn	ninistrative proceeding under any envi	ironmental law? Include settlements a	nd orders.
	■ No □ Yes. Fill in the details.			
	Case Title Case Number	Court or agency Name Address (Number, Street, City, State and ZIP Code)	Nature of the case	Status of the case
Par	11: Give Details About Your Business or	Connections to Any Business		
27.	Within 4 years before you filed for bankrupt	cy, did you own a business or have an	ny of the following connections to any	business?
	☐ A sole proprietor or self-employed i	n a trade, profession, or other activity,	either full-time or part-time	
	■ A member of a limited liability comp	any (LLC) or limited liability partnersh	ip (LLP)	
	☐ A partner in a partnership			
	☐ An officer, director, or managing ex	ecutive of a corporation		
	☐ An owner of at least 5% of the voting	g or equity securities of a corporation		
	■ No. None of the above applies. Go to F	Part 12.		
	Yes. Check all that apply above and fill	in the details below for each business	S.	
	Business Name Address (Number, Street, City, State and ZIP Code)	Describe the nature of the business  Name of accountant or bookkeeper	Employer Identification number Do not include Social Security n	umber or ITIN.
		name of accountant of bookkeeper	Dates business existed	
	Visionary Growth Strategies LLC 2 Northside Piers		EIN: 81-3867447	
	# 26M Brooklyn, NY 11249		From-To September 2016 to	March 2018
28.	Within 2 years before you filed for bankrupt institutions, creditors, or other parties.	cy, did you give a financial statement (	to anyone about your business? Includ	de all financial
	■ No □ Yes. Fill in the details below.			
	Name Address (Number, Street, City, State and ZIP Code)	Date Issued		

Debtor 1 Tristan J. Benozer		Case number (if known)
Part 12: Sign Below		
	king a false statement, concealing pro	ents, and I declare under penalty of perjury that the answers operty, or obtaining money or property by fraud in connection p to 20 years, or both.
/s/ Tristan J. Benozer		
Tristan J. Benozer Signature of Debtor 1	Signature of Debtor 2	
Date January 8, 2019	Date	
Did you attach additional pages to <i>Your St</i> ■ No □ Yes	tatement of Financial Affairs for Indivi	duals Filing for Bankruptcy (Official Form 107)?
Did you pay or agree to pay someone who	is not an attorney to help you fill out	bankruptcy forms?

☐ Yes. Name of Person \_\_\_\_\_. Attach the Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).

Fill in this inform	Fill in this information to identify your case:				
Debtor 1	Tristan J. Benozer				
Debtor 2 (Spouse, if filing)					
United States Bankruptcy Court for the:		Eastern District of New York			
Case number (if known)					

Check	as directed in lines 17 and 21:						
	ording to the calculations required by this ement:						
	1. Disposable income is not determined under 11 U.S.C. § 1325(b)(3).						
	2. Disposable income is determined under 11 U.S.C. § 1325(b)(3).						
	3. The commitment period is 3 years.						
	4. The commitment period is 5 years.						

☐ Check if this is an amended filing

#### Official Form 122C-1

# **Chapter 13 Statement of Your Current Monthly Income and Calculation of Commitment Period**

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for being accurate. If more space is needed, attach a separate sheet to this form. Include the line number to which the additional information applies. On the top of any additional pages, write your name and case number (if known).

I	Part	:1: Calculate Your Average Monthly Income						
	1.	What is your marital and filing status? Check one of	only.					
		■ Not married. Fill out Column A, lines 2-11.	•					
		☐ Married. Fill out both Columns A and B, lines 2-11						
	10 th	ill in the average monthly income that you received from a 01(10A). For example, if you are filing on September 15, the 6- e 6 months, add the income for all 6 months and divide the tot bouses own the same rental property, put the income from that	month per al by 6. Fil	iod would I in the re	l be March 1 throu sult. Do not includ	igh August 31. If the am le any income amount n	ount of your monthly income nore than once. For example	e varied during e, if both
						Column A Debtor 1	Column B Debtor 2 or non-filing spouse	
	2.	Your gross wages, salary, tips, bonuses, overtime payroll deductions).	, and co	mmissio	ons (before all	\$9,780.00	\$	
	3.	<b>Alimony and maintenance payments.</b> Do not includ Column B is filled in.	e payme	nts from	a spouse if	\$	\$	
	4.	All amounts from any source which are regularly por you or your dependents, including child support from an unmarried partner, members of your househout and roommates. Do not include payments from a sport you listed on line 3.	r <b>t.</b> Include Id, your c	e regulai depende	r contributions nts, parents,	\$0.00	\$	
	5.	Net income from operating a business, profession, or farm	Debtor	1				
		Gross receipts (before all deductions)	\$	0.00				
		Ordinary and necessary operating expenses	-\$	0.00				
		Net monthly income from a business, profession, or fa	arm \$	0.00	Copy here ->	\$	\$	
	6.	Net income from rental and other real property	Debtor					
		Gross receipts (before all deductions)	\$	0.00				
		Ordinary and necessary operating expenses	<b>-</b> \$	0.00				
		Net monthly income from rental or other real property	\$	0.00	Copy here ->	\$ 0.00	\$	

15.	Calculate your current monthly income for the year.	Follow these steps:

15a. Copy line 14 here=>

Multiply line 15a by 12 (the number of months in a year).

15b. The result is your current monthly income for the year for this part of the form. .....

9 780 00

9,780.00

x 12

Debte	or 1	Tristan J. Benozer		Case number (if known)	
16	. Cal	culate the median family income that applies to	ou. Follow thes	e steps:	
	16a	Fill in the state in which you live.	NY		
	16b	Fill in the number of people in your household.	1		
		Fill in the median family income for your state and		 ld.	¢ 54,014.00
		To find a list of applicable median income amounts instructions for this form. This list may also be available.	s, go online usin	g the link specified in the separate	Ψ <u>,</u>
17		do the lines compare?			
	17a			ge 1 of this form, check box 1, <i>Disposable inc</i> ulation of Your Disposable Income (Official Fo	
	17b		lation of Your	form, check box 2, <i>Disposable income is de</i> <b>Disposable Income (Official Form 122C-2)</b>	
Par	t 3:	Calculate Your Commitment Period Under 11	U.S.C. § 1325(k	9)(4)	
18.	Cop	y your total average monthly income from line 1	1.		\$\$
19.	con	uct the marital adjustment if it applies. If you are end that calculating the commitment period under 1 use's income, copy the amount from line 13.			
	19a	If the marital adjustment does not apply, fill in 0 on	line 19a.		-\$0.00
	19b	Subtract line 19a from line 18.			\$9,780.00_
20.	Cal	culate your current monthly income for the year.	Follow these s	teps:	0.700.00
	20a	Copy line 19b			\$9,780.00
		Multiply by 12 (the number of months in a year).			x 12
	20b	The result is your current monthly income for the y	ear for this part	of the form	\$ 117,360.00
	20c	Copy the median family income for your state and	size of househo	ld from line 16c	\$ 54,014.00
	21.	How do the lines compare?			
		Line 20b is less than line 20c. Unless otherwing period is 3 years. Go to Part 4.	se ordered by th	e court, on the top of page 1 of this form, che	eck box 3, The commitment
		Line 20b is more than or equal to line 20c. Ur commitment period is 5 years. Go to Part 4.	lless otherwise o	ordered by the court, on the top of page 1 of t	his form, check box 4, The
Par	t 4:	Sign Below			
	Ву	igning here, under penalty of perjury I declare that t	he information o	on this statement and in any attachments is tr	ue and correct.
<b>)</b>	<b>(</b> /s	Tristan J. Benozer			
		stan J. Benozer nature of Debtor 1			
		January 8, 2019			
		MM / DD / YYYY			
	-	u checked 17a, do NOT fill out or file Form 122C-2.			
	If yo	u checked 17b, fill out Form 122C-2 and file it with t	this form. On line	e 39 of that form, copy your current monthly in	ncome from line 14 above.

Fill in	this information to identify	your case:				
Debto	Tristan J. Benoz	<u>zer</u>				
Debto (Spou	r 2 se, if filing)					
United	States Bankruptcy Court for	the: Eastern District of N	lew York			
Case (if kno	number wn)			☐ Ched	ck if this is an amended	d filing
	<u>I Form 122C-2</u> Ipter 13 Calculat	tion of Your Di	isposable Ir	ncome		04/16
	out this form, you will need itment Period (Official Form		Chapter 13 Stateme	nt of Your Current Monthl	y Income and Calculation	on of
space	complete and accurate as p is needed, attach a separate nal pages, write your name	e sheet to this form, Inclu	ude the line number			
Part 1	Calculate Your Deduc	tions from Your Income				
the	Internal Revenue Service ( questions in lines 6-15. To prmation may also be availa	find the IRS standards, g	o online using the li			
exp	duct the expense amounts set enses if they are higher than t C–1, and do not deduct any a	the standards. Do not inclu	ude any operating exp	enses that you subtracted f	rom income in lines 5 and	
If yo	our expenses differ from mont	h to month, enter the avera	age expense.			
Not	e: Line numbers 1-4 are not u	sed in this form. These nu	mbers apply to inform	nation required by a similar f	orm used in chapter 7 ca	ses.
5.	The number of people use	d in determining your de	eductions from inco	me		
	Fill in the number of people plus the number of any addithe number of people in you	tional dependents whom y			1	
Nat	ional Standards Yo	u must use the IRS Nation	nal Standards to answ	ver the questions in lines 6-7	7.	
6.	Food, clothing, and other Standards, fill in the dollar a			in line 5 and the IRS Nation	nal \$	647.00
7.	Out-of-pocket health care the dollar amount for out-of- people who are 65 or older-	pocket health care. The nu	umber of people is spl	it into two categoriespeople	le who are under 65 and	

Official Form 122C-2

higher than this IRS amount, you may deduct the additional amount on line 22.

People who are under 65 years of age				
7a. Out-of-pocket health care allowance per person	\$	52		
7b. Number of people who are under 65	X	1_		
7c. <b>Subtotal.</b> Multiply line 7a by line 7b.	\$	52.00	Copy here=> \$ <b>52.00</b>	
People who are 65 years of age or older				
7d. Out-of-pocket health care allowance per person	\$	114		
7e. Number of people who are 65 or older	X	0		
7f. Subtotal. Multiply line 7d by line 7e.	\$	0.00	Copy here=> \$	
7g. <b>Total.</b> Add line 7c and line 7f		\$	52.00   Copy total here=> \$ 52.00	

Local Standards You must use the IRS Local Standards to answer the guestions in lines 8-15.

Based on information from the IRS, the U.S. Trustee Program has divided the IRS Local Standard for housing for bankruptcy purposes into two parts:

- Housing and utilities Insurance and operating expenses
- Housing and utilities Mortgage or rent expenses

To answer the questions in lines 8-9, use the U.S. Trustee Program chart. To find the chart, go online using the link specified in the separate instructions for this form. This chart may also be available at the bankruptcy clerk's office.

Housing and utilities - Insurance and operating expenses: Using the number of people you entered in line 5, fill in the dollar amount listed for your county for insurance and operating expenses.

644.00

- Housing and utilities Mortgage or rent expenses:
  - 9a. Using the number of people you entered in line 5, fill in the dollar amount listed for your county for mortgage or rent expenses.

1,855.00

9b. Total average monthly payment for all mortgages and other debts secured by your home.

To calculate the total average monthly payment, add all amounts that are contractually due to each secured creditor in the 60 months after you file for bankruptcy. Next divide by 60.

Name of the creditor	Average monthly payment		
-NONE-	\$		
9b. Total average monthly payment	\$	Copy here=> -\$	0.00 Repeat this amount on line 33a.
. Net mortgage or rent expense.			

9c.

Subtract line 9b (total average monthly payment) from line 9a (mortgage or rent expense). If this number is less than \$0, enter \$0.

\$_	1,855.00	Copy here=>	\$ 1,855.00

10. If you claim that the U.S. Trustee Program's division of the IRS Local Standard for housing is incorrect and affects the calculation of your monthly expenses, fill in any additional amount you claim.

\$	0.	00

Explain why:

ebtor 1	Trista	ın J. Benozer		Case number (if known)
11.	Local tra	Insportation expenses: Check the number of vehi	icles for which you clair	m an ownership or operating expense.
	■ 0. Go	to line 14.		
	☐ 1. Go	to line 12.		
	□ 2 or m	nore. Go to line 12.		
12.		pperation expense: Using the IRS Local Standard		
40		expenses, fill in the Operating Costs that apply for	,	'
13.	You may			the net ownership or lease expense for each vehicle below the vehicle. In addition, you may not claim the expense for
Vel	hicle 1	Describe Vehicle 1:		
13a.	Ownersh	ip or leasing costs using IRS Local Standard		\$ 0.00
13b.	Average	monthly payment for all debts secured by Vehicle 1	l.	
	Do not in	clude costs for leased vehicles.		
	are contr	ate the average monthly payment here and on line actually due to each secured creditor in the 60 morcy. Then divide by 60.		hat
	Nan	ne of each creditor for Vehicle 1	Average monthly payment	
			\$	
		Total Average Monthly Payment	\$	Copy here => -\$ 0.00 Repeat this amount on line 33b.
13c.		cle 1 ownership or lease expense line 13b from line 13a. if this number is less than \$0	0, enter \$0	S O.00 Copy net Vehicle 1 expense here => \$ 0.00
Vel	hicle 2	Describe Vehicle 2:		
13d.	Ownersh	ip or leasing costs using IRS Local Standard		\$ <u>0.00</u>
13e.	Average leased ve	monthly payment for all debts secured by Vehicle 2 shicles.	2. Do not include costs	for
	Nan	ne of each creditor for Vehicle 2	Average monthly payment	
			\$	
		Total average monthly payment	\$	Copy Repeat this amount on line 33c.
13f.	Net Vehic	cle 2 ownership or lease expense		Copy net
	Subtract	line 13e from line 13d. if this number is less than \$0	0, enter \$0	**************************************
14.		ansportation expense: If you claimed 0 vehicles ransportation expense allowance regardless of		
15.	also dedu	al public transportation expense: If you claimed uct a public transportation expense, you may fill in worse than the IRS Local Standard for Public Trans	what you believe is the	

Debtor 1	Tristan J. Benozer				Case number (if known)			
Oth	er Necessary Expenses	In addition to the expense the following IRS categorie		s listed above,	you are allowed your monthly expens	ses for		
16.	self-employment taxes, soc	cial security taxes, and Med owever, if you expect to rec	licare taxes ceive a tax	s. You may inc refund, you m	d local taxes, such as income taxes, lude the monthly amount withheld from ust divide the expected refund by 12 for taxes.		2 207 20	
	Do not include real estate,	sales, or use taxes.				\$	3,097.00	
17.	Involuntary deductions: T contributions, union dues, a	and uniform costs.			•	¢	2,037.00	
		, ,, ,	•	,	1(k) contributions or payroll savings.	\$	2,037.00	
18.	filing together, include payn Do not include premiums for	<b>Life Insurance:</b> The total monthly premiums that you pay for your own term life insurance. If two married people are illing together, include payments that you make for your spouse's term life insurance. Do not include premiums for life insurance on your dependents, for a non-filing spouse's life insurance, or for any form of life insurance other than term.						
19.	Court-ordered payments: administrative agency, such				by the order of a court or			
	• •		. ,		ou will list these obligations in line 35	s. \$	0.00	
20.	Education: The total month	hly amount that you pay for	education	that is either r	equired:			
	as a condition for your jo	ob, or						
	for your physically or me	entally challenged depende	nt child if n	o public educa	ation is available for similar services.	\$	0.00	
21.	<b>Childcare:</b> The total month Do not include payments for			•	itting, daycare, nursery, and preschool	ol. \$	0.00	
22.		th and welfare of you or you	ur depende	nts and that is	amount that you pay for health care s not reimbursed by insurance or paid Il entered in line 7.		0.00	
	Payments for health insurar	nce or health savings accor	unts should	d be listed only	in line 25.	\$	0.00	
23.	for you and your dependent phone service, to the extensincome, if it is not reimburse Do not include payments for	ts, such as pagers, call wai t necessary for your health ed by your employer. or basic home telephone, in	ting, caller and welfar ternet and	identification, e or that of yo cell phone ser	you pay for telecommunication service special long distance, or business cel ur dependents or for the production of vice. Do not include self-employment ount you previously deducted.	l f	0.00	
24.	Add all of the expenses a Add lines 6 through 23.	llowed under the IRS exp	ense allov	vances.		\$	8,510.00	
Add	itional Expense Deduction	These are additional Note: Do not include						
25.					ses. The monthly expenses for health ly necessary for yourself, your spouse			
	Health insurance		\$	0.00				
	Disability insurance		\$	0.00				
	Health savings account		+ \$	0.00				
	Total		\$	0.00	Copy total here=>	\$	0.00	
	Do you actually spend this a				1			
	Yes		\$					
26.	continue to pay for the reas	sonable and necessary care	and supp	ort of an elder	actual monthly expenses that you wi ly, chronically ill, or disabled member			
	your household or member include contributions to an				uch expenses. These expenses may 29A(b)	\$	0.00	
27.					nses that you incur to maintain the es Act or other federal laws that apply	· <u>.</u>		
	By law, the court must keep	the nature of these expen	ses confide	ential.		\$	0.00	

Debtor 1	Tristan J. Benozer	Cas	se number ( <i>if kno</i>	own)					
	Additional home energy costs. Your hom line 8.	e energy costs are included in your insurance	e and operat	ting e	xpens	es on			
	If you believe that you have home energy of 8, then fill in the excess amount of home en	osts that are more than the home energy cos ergy costs	sts included i	n exp	enses	on line			
	You must give your case trustee documenta amount claimed is reasonable and necessa	ation of your actual expenses, and you must ry.	show that the	e ado	ditional		\$		0.00
		ren who are younger than 18. The monthly pendent children who are younger than 18 younger than							
	You must give your case trustee documenta claimed is reasonable and necessary and n	ation of your actual expenses, and you must ot already accounted for in lines 6-23.	explain why	the a	mount				
	* Subject to adjustment on 4/01/19, and eve	ery 3 years after that for cases begun on or a	fter the date	of ac	ljustme	ent.	\$		0.00
		ne monthly amount by which your actual food allowances in the IRS National Standards. T s in the IRS National Standards.							
		onal allowance, go online using the link spec to be available at the bankruptcy clerk's office		epar	ate				
	You must show that the additional amount of	claimed is reasonable and necessary.					\$		0.00
	Continuing charitable contributions. The instruments to a religious or charitable orga	amount that you will continue to contribute in nization. 11 U.S.C. § 548(d)(3) and (4).	n the form of	cash	or fina	ancial			
	Do not include any amount more than 15%	of your gross monthly income.					\$		50.00
	Add all of the additional expense deduct Add lines 25 through 31.	ions.					\$_		50.00
Ded	uctions for Debt Payment								
33 F	For debts that are secured by an interest	in property that you own, including home	mortgages.	veh	icle				
l	oans, and other secured debt, fill in lines	33a through 33e.		,					
	o calculate the total average monthly paymereditor in the 60 months after you file for bar	ent, add all amounts that are contractually dunkruptcy. Then divide by 60.	ie to each se	ecure	d				
	Mortgages on your home						Avera payn	age mon nent	thly
33a.	Copy line 9b here					=>	\$		0.00
	Loans on your first two vehicles								
33b.	Copy line 13b here					=>	\$		0.00
33c.						=>	\$		0.00
33d.	List other secured debts:								
Nam	e of each creditor for other secured debt	Identify property that secures the debt		inclu	s paym ide tax suranc	es			
					No				
	-NONE-				Yes		\$		
							Ψ —		
					No				
					Yes		\$		
					No				
					Yes	+	¢		
					. 50	· ¬	<b>°</b> =		
						Сору			I
33e	Total average monthly payment. Add lines	33a through 33d	\$	(	0.00	total here=	\$ \$		0.00

	On to line 25								
	Go to line 35. State any amount that you	must pay to a graditar :	n addition to th	o povmente					
□ res.	listed in line 33, to keep po Next, divide by 60 and fill i	ssession of your propert							
Name of the	creditor	Identify property that s	ecures the debt		Total cu	re amount		onthly cu	re
-NONE-				\$			÷ 60 = \$		
				Total	\$	0.00	Copy total here=>	\$	0.00
	owe any priority claims - s due as of the filing date o				at				
■ No.	Go to line 36.		ŭ						
	Fill in the total amount of a ongoing priority claims, su			e current or					
	Total amount of all past-o	lue priority claims			\$	0.00	÷ 60	\$	0.00
6. Projecte	ed monthly Chapter 13 plan	n payment			\$		_		
Office of the Exec To find a I	multiplier for your district as a the United States Courts (focutive Office for United State list of district multipliers that inclainstructions for this form. This lis	or districts in Alabama an s Trustees (for all other oudes your district, go online	d North Carolir districts). using the link spe	na) or by	x		1		
Average	monthly administrative expe	ense			\$		Copy total		
	of the deductions for deb	t payment.						\$	0.00
	es 33e through 36.								
Add line	es 33e through 36.								
Add line	Ü								
Add line  Fotal Deduct  38. Add all o  Copy lir	otions from Income of the allowed deductions. The 24, All of the expenses all		\$	8,510.00	) -				
Add line  Fotal Deduct  88. Add all c  Copy lir  expens	otions from Income of the allowed deductions. The 24, All of the expenses all	llowed under IRS	\$	8,510.00 50.00	_				
Add line  Fotal Deduct  38. Add all c  Copy line  Copy line  Copy line	of the allowed deductions. The 24, All of the expenses are allowances	llowed under IRS xpense deductions	\$	•	<u> </u>				

☐ 122C-1

☐ 122C-2

☐ 122C-1 ☐ 122C-2

☐ Increase

☐ Decrease ☐ Increase

☐ Decrease

Debtor 1	Tristan J. Benozer	Case number (if known)	
Part 4:	Sign Below		
E	By signing here, under penalty of perjury you declare that the inform	ation on this statement and in any attachments is true and correct.	
X.	/s/ Tristan J. Benozer Tristan J. Benozer Signature of Debtor 1		
Date	<b>January 8, 2019</b> MM / DD / YYYY		

#### **United States Bankruptcy Court** Eastern District of New York

In re	Tristan J. Benozer		Case No		
		Debtor(s)	Chapter	13	
	DISCLOSURE OF COMP	ENSATION OF ATTO	RNEY FOR D	EBTOR(S)	
(	Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 20 ompensation paid to me within one year before the five rendered on behalf of the debtor(s) in contemplatio	ling of the petition in bankruptc	y, or agreed to be pai	d to me, for services rend	lered or to
	For legal services, I have agreed to accept		\$	4,000.00	
	Prior to the filing of this statement I have receive	d	\$	4,000.00	
	Balance Due		\$	0.00	
2.	The source of the compensation paid to me was:				
	■ Debtor □ Other (specify):				
3.	The source of compensation to be paid to me is:				
	■ Debtor □ Other (specify):				
4.	I have not agreed to share the above-disclosed cor	mpensation with any other perso	n unless they are me	mbers and associates of m	ny law firm.
	☐ I have agreed to share the above-disclosed competed copy of the agreement, together with a list of the results.				firm. A
5.	in return for the above-disclosed fee, I have agreed to	render legal service for all aspe	cts of the bankruptcy	case, including:	
l	<ul> <li>Analysis of the debtor's financial situation, and renote.</li> <li>Preparation and filing of any petition, schedules, standard renote.</li> <li>Representation of the debtor at the meeting of credit.</li> <li>[Other provisions as needed]</li> <li>Negotiations with secured creditors to reaffirmation agreements and applicate 522(f)(2)(A) for avoidance of liens on headers.</li> </ul>	tatement of affairs and plan white litors and confirmation hearing, o reduce to market value; ex- tions as needed; preparation	ch may be required; and any adjourned he xemption planning	earings thereof;	ng of
б. I	By agreement with the debtor(s), the above-disclosed Representation of the debtors in any cany other adversary proceeding.			ces, relief from stay a	actions or
		CERTIFICATION			
	certify that the foregoing is a complete statement of ankruptcy proceeding.	any agreement or arrangement for	or payment to me for	representation of the deb	otor(s) in
Ja	nuary 8, 2019	/s/ Glenn L. Kar	ntor		
D	ate	Glenn L. Kantor Signature of Attorn Glenn L. Kantor 150 Motor Parky	ney ·		
			way		
		Suite 401 Hauppauge, NY	-		
		Suite 401	11788		

## **United States Bankruptcy Court Eastern District of New York**

In re	Tristan J. Benozer	Case No.		
		Debtor(s)	Chapter	13

#### **VERIFICATION OF CREDITOR MATRIX**

The above named debtor(s) or attorney for the debtor(s) hereby verify that the attached matrix (list of creditors) is true and correct to the best of their knowledge.

Date: January 8, 2019	/s/ Tristan J. Benozer	
	Tristan J. Benozer	
	Signature of Debtor	
Date: January 8, 2019	/s/ Glenn L. Kantor	
	Signature of Attorney	
	Glenn L. Kantor	
	Glenn L. Kantor	
	150 Motor Parkway	
	Suite 401	
	Hauppauge, NY 11788	
	877-725-0700	

USBC-44 Rev. 9/17/98

American Express P.O. Box 1270 Newark, NJ 07101-1270

Bryan Gartner 325 Fifth Ave. Apt. 36 New York, NY 10016

Chase Bank USA NA PO Box 15153 Wilmington, DE 19886-5153

Great Lakes
P.O. Box 7860
Madison, WI 53707-7860

Lending Club Corporation P.O. Box 39000 San Francisco, CA 94139

Lightstream / Suntrust 303 Peachtree Street, NE Atlanta, GA 30308

Pay Pal 2211 North First St. San Jose, CA 95131

## UNITED STATES BANKRUPTCY COURT EASTERN DISTRICT OF NEW YORK

# STATEMENT PURSUANT TO LOCAL BANKRUPTCY RULE 1073-2(b)

<b>DEBTOR(S):</b>	Tristan J. Benozer	CASE NO.:
	Local Bankruptcy Rule 1073-2(b), the debtor (or any other per Cases, to the petitioner's best knowledge, information and belie	
was pending at any spouses or ex-spous partnership and one have, or within 180	be deemed "Related Cases" for purposes of E.D.N.Y. LBR 107 time within eight years before the filing of the new petition, and ses; (iii) are affiliates, as defined in 11 U.S.C. § 101(2); (iv) are gor more of its general partners; (vi) are partnerships which shard days of the commencement of either of the Related Cases had, a estate under 11 U.S.C. § 541(a).]	If the debtors in such cases: (i) are the same; (ii) are general partners in the same partnership; (v) are a re one or more common general partners; or (vii)
NO RELATED	CASE IS PENDING OR HAS BEEN PENDING AT ANY TIM	IE.
☐ THE FOLLOW	ING RELATED CASE(S) IS PENDING OR HAS BEEN PEND	DING:
1. CASE NO.:	JUDGE: DISTRICT/DIVISION:	
CASE STILL PENI	DING (Y/N): [If closed] Date of closing:	
CURRENT STATI	US OF RELATED CASE:	
	(Discharged/awaiting discharged/awaiting disch	harge, confirmed, dismissed, etc.)
MANNER IN WH	ICH CASES ARE RELATED (Refer to NOTE above):	
	LISTED IN DEBTOR'S SCHEDULE "A" ("REAL PROPERT F RELATED CASE:	Y") WHICH WAS ALSO LISTED IN
2. CASE NO.:	JUDGE: DISTRICT/DIVISION:	
CASE STILL PENI	DING (Y/N): [If closed] Date of closing:	<u></u>
CURRENT STAT	US OF RELATED CASE:(Discharged/awaiting disc	harge, confirmed, dismissed, etc.)
MANNER IN WH	ICH CASES ARE RELATED (Refer to NOTE above):	
	LISTED IN DEBTOR'S SCHEDULE "A" ("REAL PROPERT F RELATED CASE:	Y") WHICH WAS ALSO LISTED IN
3. CASE NO.:	JUDGE: DISTRICT/DIVISION:	
CASE STILL PENI	DING (Y/N): [If closed] Date of closing:	

### DISCLOSURE OF RELATED CASES (cont'd) CURRENT STATUS OF RELATED CASE: (Discharged/awaiting discharge, confirmed, dismissed, etc.) MANNER IN WHICH CASES ARE RELATED (Refer to NOTE above): REAL PROPERTY LISTED IN DEBTOR'S SCHEDULE "A" ("REAL PROPERTY") WHICH WAS ALSO LISTED IN SCHEDULE "A" OF RELATED CASE: NOTE: Pursuant to 11 U.S.C. § 109(g), certain individuals who have had prior cases dismissed within the preceding 180 days may not be eligible to be debtors. Such an individual will be required to file a statement in support of his/her eligibility to file. TO BE COMPLETED BY DEBTOR/PETITIONER'S ATTORNEY, AS APPLICABLE: I am admitted to practice in the Eastern District of New York (Y/N): Y CERTIFICATION (to be signed by pro se debtor/petitioner or debtor/petitioner's attorney, as applicable): I certify under penalty of perjury that the within bankruptcy case is not related to any case now pending or pending at any time, except as indicated elsewhere on this form. /s/ Glenn L. Kantor Glenn L. Kantor Signature of Pro Se Debtor/Petitioner Signature of Debtor's Attorney Glenn L. Kantor 150 Motor Parkway Suite 401 Hauppauge, NY 11788 Signature of Pro Se Joint Debtor/Petitioner 877-725-0700 Mailing Address of Debtor/Petitioner City, State, Zip Code Area Code and Telephone Number Failure to fully and truthfully provide all information required by the E.D.N.Y. LBR 1073-2 Statement may subject the debtor or any

other petitioner and their attorney to appropriate sanctions, including without limitation conversion, the appointment of a trustee or the dismissal of the case with prejudice.

<u>NOTE</u>: Any change in address must be reported to the Court immediately IN WRITING. Dismissal of your petition may otherwise result.

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